CLAIMS

1. A capsular bag intraocular implant comprising: an optic portion (10) of substantially circular shape defining an edge (16), an anterior interface surface (12), and a posterior interface surface (14); and a haptic portion comprising at least two arms (22, 23, 60, 62, 40) extending radially relative to the optic portion, said implant being characterized in that each arm (22, 23, 60, 62, 40) comprises:

· a main portion (22a, 60a, 62a, 40a);

· a connection end (22b, 60b, 62b, 40b) connected to the optic portion, said connection end having a thickness in the direction of the optical axis that is smaller than the thickness of the main portion so as to form a flexing line (Z-Z') that is substantially tangential to the optic portion; and

· a contact end (22c) presenting a contact edge (26, 64, 41) for contacting the inside wall of the capsular bag; said contact edge being disposed on a circle (C1) that is concentric about the optic portion and of diameter greater than the diameter of the capsular bag, being not less than 10.5 mm;

· said main portion of each arm (22a, 60a, 62a, 40a) forming an angle in a forward direction relative to the optical plane (P-P') in such a manner that said flexing line is closer to the optical plane than is said contact edge;

whereby, when the implant is put into place in the capsular bag, the optic portion is displaced towards the posterior wall of the capsular bag by the arms turning about the flexing lines defined by their connection ends, under the effect of the stress applied by the capsular bag to the contact ends of the arms.

2. An intraocular implant according to claim 1, characterized in that the contact end (22c, 40c) of each arm (22, 23, 40) is bent rearwards relative to the main

portion (22a, 40a) of the arm, forming a bend in such a manner that the contact edge (26, 64, 41) is closer to the optical plane of the optic portion than is the bend,

whereby, under the effect of the stress applied by the capsular bag, the connection ends come to bear against the anterior wall of the capsular bag.

3. An intraocular implant according to claim 2, characterized in that the angle b between the main portion (22a, 40a) of an arm and its contact end (22c, 40c) lies in the range 90° to 150°.

4. An intraocular implant according to any one of claims 1 to 3, characterized in that it further comprises at least two connection pieces (28, 48, 50, 52, 54) in the form of circular arcs concentric with the optic portion, each end (28a, 28b, 48a, 48b) of each connection piece being connected to an arm (22, 23, 40, 42, 44, 46), said connection pieces being disposed on the same circle.

5. An intraocular implant according to claims 2 and 3, characterized in that the ends of the connection pieces (28, 48, 50, 52, 54) are connected to the arms at the bends (24, 56) so that the contact ends (22c, 40c) of the arms extend beyond the circle on which said connection pieces are disposed.

6. An intraocular implant according to claim 4 or claim 5, characterized in that said haptic portion comprises four arms (40, 42, 44, 46) offset at 90° intervals, and four connection pieces (48, 50, 52, 54).

7. An intraocular implant according to claim 4 or claim 5, characterized in that said haptic portion comprises four arms (22, 23) forming two pairs of arms, the arms in any one pair being offset from each other by an angle of less than 90°, the haptic portion also having two

connection pieces (28), each connection piece interconnecting the two arms of a corresponding pair.

8. An intraocular implant according to any one of claims 1 to 7, characterized in that the length of the connection end (22c, 40c) is shorter than the width of the main portion (22a, 40a) of the arm.

9. An intraocular implant according to any one of claims 1 to 8, characterized in that the contact edge (26, 41, 64) of each arm is in the form of an arc of a circle of diameter lying in the range 2.5 mm to 10.5 mm, and preferably of 10 mm, whereby said edge is in contact with the capsular bag over a large zone.

10. An intraocular implant according to any one of claims 1 to 9, characterized in that the periphery of the posterior interface surface (14) forms a "square" edge (40) with the edge of the optic portion.

11. An intraocular implant according to claim 10, characterized in that the small thickness of the connection end (22b, 40b, 62b) creates a posterior "step" that extends said posterior "square" edge (40).